

State of California—Health and Human Services Agency Department of Health Services



April 2, 2003

Dear Interested Parties:

MEDI-CAL REIMBURSEMENT RATE SUPPORT SERVICES (MCRRSS) REQUEST FOR PROPOSAL 03-75011 ADMINISTRATIVE BULLETIN 2

The following are the answers to the questions submitted prior to and during the MCRRSS pre-proposal bidders conference.

If you have any questions, please contact Cristyn Lao, at (916) 323-7406.

Sincerely,

Donna Martinez, Chief Office of Medi-Cal Procurement



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#	RFP Section	Pg	Question/Comment	Response
1			What format is used for the storage of files contained in the database and the Data Library?	For purposes of the response to this question, "database" refers to documents in the current contractor's possession, whereas "Data Library" refers to the materials in the possession of the Office of Medi-Cal Procurement. Hard copies of files contained in the Data Library are available for review by appointment (see Section E) and are also available electronically (see Section E.5). DHS does not directly access files in the database, which are stored in varying formats.
2			Can DHS access the current contractor's database, or does the current contractor respond to DHS' specific requests for data?	DHS does not directly access the current contractor Tucker Alan, Inc.'s database. Tucker Alan, Inc. provides reports and information in response to DHS requests for data.
3	Exhibit B, Attachment 1- V: Budget Detail Worksheet		Are potential bidders required to submit both a Cost Proposal and a Price Proposal?	Potential bidders must complete both the Cost Section (Attachment 12) and the Budget Detail Worksheets (Exhibit B, Attachments I, II, III, IV, and V).
	Attachment 12: Cost Section	1-3		
4	Exhibit E, Section J: Additional Provisions	6	Are there any specific security standards already outlined?	Please refer to Exhibit E, Section J: Additional Provisions, Protection From Unauthorized Disclosure.
5	Exhibit E, Section F: Additional Provisions	4	Are there any defined service level agreements for accessibility or response time?	Please refer to Exhibit E, Section F: Additional Provisions, Inspection Rights and Access Requirements.

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6	Attachment 14: Conflict of Interest Compliance Certificate	1-2	Would Associate Business Membership in the California Association of Health Facilities create a possible conflict of interest?	Please refer to Attachment 14: Conflict of Interest Compliance Certificate.
7			Please clarify whether a contract resulting from this procurement would preclude a bidder from contracting with DHS for other Medi-Cal services, specifically, from contracting as an HMO in the managed care program through a procurement or through an acquisition of a contracted HMO.	Please refer to Attachment 14: Conflict of Interest Compliance Certificate.
8	Exhibit B, Attachment I-V Attachment 12: Cost Section	1-3	Please clarify the requirements for the price proposal. One section of the RFP requests a detailed salary and benefits description, while another section requests hourly rates. How will these pieces of information be used in your analysis? Our salary information is confidential. What alternative information can be provided to assist you in understanding our cost proposal?	The Cost Proposal must be submitted with the required signature in a sealed envelope with the statement "Cost Proposal" written on the outside of the envelope. Please refer to Proposal Format and Content Requirements (Section K); Format Requirements (Section K2a1); Content Requirements (Section K3); and Cost Section (Section K3i).
9	Attachment 12: Cost Section	1-2	Our firm uses titles that are different from those on the price proposal page. For example, because we are a Partnership, we do not have a Vice President position. How should differences in job titles be addressed in the price proposal since the form clearly states no changes are to be made?	DHS understands that some firms/partnerships may use job titles that are different from the personnel classes listed on the Cost Proposal Form. For the purposes of this RFP, bidders may list alternative job titles that closely match the knowledge and abilities of the personnel classes listed on the Cost Proposal Form. Please attach a short statement to the Cost Proposal Form, identifying 1) the title from the Cost Proposal Form that your firm does not use and 2) the title that your firm uses which you believe is equivalent to the title set forth in the Cost Proposal Form. DHS will not construe the attachment of this statement to the Cost Proposal Form as being non-responsive.

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10			What is the forum for addressing concerns related to contract terms?	Questions related to the terms set forth in the RFP should be directed to Cristyn Lao (see Section D). However, note that a proposal that includes alterations to the terms and conditions published in Exhibits C, D(F), and E may be considered to be non-responsive.
11			What process is used to adjust the budget should DHS identify a need for services that exceed the stated annual budget for this contract?	Any necessary changes in contract funding will be made through DHS's contract amendment process.
12	Section K, Item h: Proposal Format and Content Requirements, Facilities and Resources Section	22	The Facilities and Resources Section of the RFP requests numbers of buildings and square footage. As a very large firm with 100's of offices, we do not centralize that information. Is there an alternative response that will suffice to provide DHS assurance that adequate space is available to provide the requested services?	DHS will evaluate the information proposers supply in response to instructions contained in the Facilities and Resources section of the RFP in order to determine proposers' capacities to perform the Scope of Work. The RFP requests information about facilities and resources relating to "your capacity to perform the scope of work." (Section K3h.) Therefore, proposers need only provide that level of information necessary to establish this capacity.
13			Should additional questions arise after the deadline for submitting questions, to whom should they be addressed?	DHS will respond to inquiries about DVBE requirements or the reporting of RFP errors until the proposal submission deadline. These questions may be submitted to Cristyn Lao at, OMCPRFP2@DHS.CA.GOV or (916) 323-7406. If questions on subjects not referenced above are received after the question deadline, DHS may or may not respond to them.
14	Section K, Item i: Proposal Format and Content Requirements, Cost Section	23	Page 23 of the RFP (Cost Section) details the instructions for the Cost Proposal Form and Budget Detail Work Sheets. Our firm is privately owned, and, as such, does not provide cost "build-up" schedules, such as those requested in the Budget Detail Work Sheets. Is this a definite requirement, or may we substitute submission of such Work Sheets with a valid narrative describing our inability to submit such documentation (or some other alternative)?	The Cost Proposal Form (Attachment 18) and Budget Detail Work Sheets (Exhibit B, Attachments I – V) must be completed in accordance with the RFP instructions.

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15	Attachment 12: Cost Section	1-3	The Cost Proposal Form (Attachment 12) requests only a single "hourly bid rate" for each designated personnel class. The contract is expected to last from three to five years. Should we submit five separate years' of hourly bid rates for each personnel class, or one single rate (per personnel class) averaging across the potential five year period?	Cost proposal evaluation has been designed to evaluate one figure per personnel class for the entire contract term. Therefore, proposers who anticipate variances in rates over the contract term may wish to average rates across the potential five-year contract term. DHS may construe a proposal that submits five separate years' of hourly bid rates for each personnel class as being non-responsive.
16	Section E: Data Library	9	Is the data library a database that can be accessed by potential bidders?	For this particular RFP there will be copies of the current State Medi-Cal Litigation Contract #98-15416, sample reports/studies, and brief overviews of State Litigation cases. See Section E for specific access requirements.
17			What percentage of the data delivered to us would be in hardcopy or electronic format?	The format for delivery of data varies. It is dependent upon the individual project's requirements.
18			Is the database comprised solely of litigation related documents?	No. The database also includes data used in rate studies.
19			Does the database need to be developed from scratch or does it exist already? Will it be transferred from the current contractor in the event a new contractor is chosen?	The current contractor has developed an existing database. DHS anticipates that the existing database will be utilized by the contractor awarded the contract for RFP #03-75011.
20			What is the format of existing data?	The existing data is in Structured Query Language (SQL) Server or Microsoft Access format.
21			What is the current volume of data? What could it grow to in a year? In two years?	The current datasets are estimated to be between 40 and 60 gigabytes of data. DHS estimates that the volume of data will grow in future years.
22			Who needs access to data and work product (Contractor personnel only or Contractor and Medi-Cal personnel or others?) Who would the others be?	Contractor personnel, Medi-Cal personnel and possibly plaintiffs in litigation will need access to data and work product.

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23			How does DHS expect the data and the work products to potentially be delivered: direct web access, exported files, printed material? If exported files, how frequently are such requests made? In what format would exports be expected to be delivered?	The data and the work products are to be delivered using any and all methods available. Frequency is dependent upon each individual project's scope and timing requirements. Format for delivery will vary, depending on written/verbal presentation requirements.
24			How is new data deliveredhardcopy, electronically, or both?	New data is delivered in both hardcopy and electronic formats.
25			In what format do you require the database and Medicaid computer models to be kept?	Databases and computer models are stored in either SQL Server or Microsoft Access formats.
26			In what format and when, in relation to Provider year-ends, is the cost report data going to be made available for inclusion in the database?	California cost report data is made available by the Office of Statewide Health Planning and Development. Their office may be contacted to check on the format and availability of data.
27			Are there special applications associated with the data now? What are the applications?	No. There are no special applications.
28			Where will the databases and applications be hosted?	The databases and applications will be hosted at the contractor's place of business.
29			Is there a Medi-Cal claims data warehouse? Will the contractor have open access to this information? If not, how will the contractor access this information?	Electronic Data Systems (EDS) is the State's fiscal intermediary responsible for maintaining Medi-Cal claims data. EDS information may be accessed by the contractor via data requests to EDS, or through DHS.
30			In what form will data be transmitted from DHS to the contractor? What is the volume of data likely to be transmitted? What is the frequency of data transfers?	In the past, data has been transmitted via tape cartridge or CD-ROM. The volume and frequency of data transfers is dependent upon the scope and timing of the project requirements.
31			Historically, what proportions of the fees have been spent on each of the 12 delineated items in the Scope of Work?	Because each litigation case has a different level of complexity, it is difficult to provide an accurate proportion of the fees spent.

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32			Since expert testimony in itself can be an expensive proposition, how often is expert testimony a part of this work and to what extent?	The need for expert testimony is dependent upon the litigation case.
33			Has the nature of the litigation historically involved one provider program at a time (i.e., hospital litigation only, nursing facility litigation only, etc.)?	Historically, litigation cases have involved rate reimbursement issues affecting a particular provider type.
34			If the litigation has been restricted to one provider program at a time, would the Department consider awarding contracts to two or more contractors under this procurement to assure that the Department has access to the most qualified contractor within each health care provider program (i.e., hospitals, nursing facilities, etc.)?	There is no assurance that future litigation will be restricted to one provider type. DHS will award the contract based on the evaluation of the proposals submitted for RFP #03-75011. The RFP for this procurement will result in a contract award to only one contractor.
35			Will there be any parallel requirements for Project Management or Project Oversight?	It is highly unlikely that there will be any parallel requirements for Project Management or Project Oversight with RFP #03-75011. Most of the work of the Contractor will be done in a supporting role to the DHS Office of Legal Services.
36			Are any third party litigation support tools in use currently? Do you envision using them in the future? If so which one(s)?	No. Such tools are not typically used by DHS.
37			Do you have Medi-Cal or state specific software and development standards to which the vendor must adhere?	Yes. All standards are noted in the State's contract language.
38			What analyses are currently taking place and can you provide any examples?	The Data Library contains information on litigation cases, reports, and studies that the current contractor has worked on.
39			Who is currently providing services similar to those requested in this RFP? How long has that contract been in place?	Tucker Alan, Inc. currently provides similar services under contract #98-15416. The contract has been in place since July 1, 1998.